

# Quebec's Social and Health Survey Information

Compendium of tables including mother tongue information  
derived from 1998 Quebec Social and Health Survey  
**The Baseline Data Report 2007-2008**



Prepared by the

## CHSSN

Community Health  
and Social Services Network

for the Health and Social Services  
Networking and Partnership Initiative

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## Acknowledgements

This report builds upon the extensive work of Jan Warnke and Jim Carter who are responsible for preparing the tables that present the findings of the 1998 Quebec Social and Health Survey.<sup>1</sup> These tables were originally assembled as a companion resource to the CHSSN *Community Guide to the Population Health Approach*, available on their website at [www.chssn.org](http://www.chssn.org).

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*The views expressed herein do not necessarily represent the official policies of the Quebec Community Groups Network or of Health Canada.*

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<sup>1</sup> Institut de la statistique du Québec, *Enquête sociale et de santé* 1998.

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## Introduction

### ***The Health and Social Services Networking and Partnership Initiative***

The Health and Social Services Networking and Partnership Initiative (HSSNPI) is a funding program of the Quebec Community Groups Network mandated by Health Canada as a measure of the Federal Action Plan for Official Language Communities. The HSSNPI aims to support the creation of durable links and joint action between English-speaking communities and Quebec's health and social services system. The Baseline Data Report is a series produced by the Community Health and Social Services Network (CHSSN) to serve as a relevant and comprehensive knowledge base regarding the health status and vitality of Quebec's English-speaking population. The report is intended to serve as a resource that will allow local communities to better understand the demographic factors and health determinants affecting them and to assist institutional partners and community leaders to develop strategies to improve the well-being of their constituencies.

The Baseline Data Report 2008 is the fifth of a five volume series. The first report in 2004 consolidated existing knowledge and created a template for generating the first integrated regional portraits of Quebec's Anglophone communities. The second report in 2005 was devoted to statistical profiles of the HSSNPI participants at the level of CLSC territories in order to provide an evidence base they could readily use to build effective local networks. The third report in 2006 focused on presenting the provincial and regional findings of the 2005 CHSSN-CROP Survey on Community Vitality as it pertains to English-language health and social service access in Quebec. Baseline Data report 2007 chronicled the development and implementation of each of what are now eleven networks (including CHSSN) funded by the HSSNPI through first-hand accounts of the challenges, best practices and overall assessment of the impact of network activities.

The Baseline Data Report 2008 provides extensive health information concerning Quebec citizens derived from the Quebec Social and Health Survey of 1998. A wide range of characteristics and practices such as lifestyle habits and preventative behaviours, prevalent health problems as well as recourse to the health and social service system are considered as they are differentially manifested in the sample population in terms of language, age, gender, income, education as well as household and family type. The presentation of the survey findings takes the form of a report with some 279 highlighted tables and 28 section summaries.

### ***The Quebec Social and Health Survey***

While the 2008-2009 Baseline Data Report is intended to build upon the extensive demographic, survey and interview data analyzed in previous volumes, it is primarily focused on presenting the findings of the 1998 Quebec Social and Health Survey (*Enquête Sociale et de Santé*) conducted by the Institut de la statistique du Québec. Approximately 20,000 Quebec citizens participated in the survey with some 18,000 French mother tongue and 1,000 English mother tongue respondents. Throughout the study previous surveys from 1978 and 1992-1993 are included to provide a point of comparison with the 1998 findings and lend insight into changes occurring over time in the Quebec population.

The health determinants considered in the Quebec survey are organized in terms of “an ecological model”<sup>2</sup> of assessing health and well-being. This is a dynamic and multi-dimensional approach that organizes the treatment of different health themes into five levels. These include characteristics of the individual, the immediate milieu, social networks, social conditions and the physical and normative environment. The first level reflects the key pillar of recent reforms of the health and social services system; namely, that the individual is the heart of the system. The other levels reflect Quebec’s policy which suggests that health and well-being results from a constant interaction between the individual and his or her milieu and is based on a balanced sharing of responsibilities between individuals, families, their milieus, public authorities and the other areas of collective life.

The first section of this report presents tables with some key characteristics of the survey sample population including age, gender, civil status, income level and education. In recognition of income as a key health determinant this section also includes tables which draw on the 2001 Census, therefore the larger Quebec population, to inform us of the percentage of persons in families and unattached individuals living below the Statistics Canada low-income cut-offs by first official language spoken and administrative region

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<sup>2</sup> For further elaboration of the ecological model, see *Institut de la statistique du Québec, Enquête sociale et de santé, 1998, p.53.*